

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0851-0031

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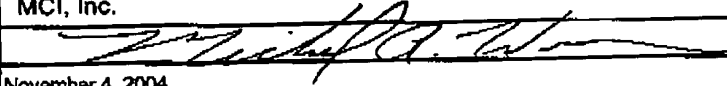
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/158,695	
	Filing Date	September 24, 1998	
	First Named Inventor	BARRY et al	
	Art Unit	2143	
	Examiner Name	B. Jaroenchonwanit	
Total Number of Pages in This Submission	4 + 1 Ref	Attorney Docket Number	COS97087

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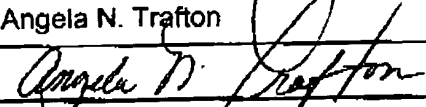
NOV 4 2004

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavit/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO Form 1449
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	1 Reference
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael A. Wrenn, Reg. No.: 42,237 MCI, Inc.
Signature	
Date	November 4, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Angela N. Trafton		
Signature		Date	11/4/2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/8B/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
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for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT**

(\$ 180.00)

Complete if Known

Application Number	09/159,695
Filing Date	September 24, 1998
First Named Inventor	BARRY et al
Examiner Name	B. Jaroenchonwanit
Art Unit	2143
Attorney Docket No.	COS97087

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:

Deposit Account Number

13-2491

Deposit Account Name

MCI, Inc.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims -20** = X 18 =
 Independent Claims -3** = X 86 =
 Multiple Dependent =

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130	1053 130	2053 130	Non-English specification	
1812 2,520	1812 2,520	1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	1502 480	2502 240	Design issue fee	
1503 640	2503 320	1503 640	2503 320	Plant issue fee	
1460 130	1460 130	1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	180.00
1806 180	1806 180	1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 170	2801 385	1801 170	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 180.00)

(Complete if applicable)

SUBMITTED BY

Name (Print/Type)

Michael A. Wrenn

Registration No.

42,237

(Attorney/Agent)

Telephone 202-738-6522

Signature

Date

November 4, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

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Docket No.: COS97087

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): BARRY et al

Confirmation No.: 5454

Serial No.: 09/159,695

Art Unit: 2143

Filed: September 24, 1998

Examiner: B. Jaroenchonwanit

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Title: Integrated System for Providing Communications Network Management
Services and Interactive Generating Invoice DocumentsINFORMATION DISCLOSURE STATEMENTCommissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the documents listed on the attached form PTO-1449. It is respectfully requested that the documents be expressly and independently considered during the prosecution of this application, and that the documents be made of record therein and appear among the "References Cited" on any patent to issue therefrom.


This Information Disclosure Statement is being submitted before the mailing date of either a final action or a notice of allowance and is accompanied by the requisite fee of \$180.00.

Each of the documents listed on the attached form equivalent to Form PTO-1449 is in the English language.

It is respectfully requested that the documents cited in this Information Disclosure Statement be independently considered by the Examiner.

Please charge any shortage in the fees due in connection with the filing of this paper, including extension of time fees, to Deposit Account No. 13-2491, and please credit any excess fees to such deposit account.

Respectfully submitted,

Date: 11/4/2004
Michael A. Wrenn
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